

EUROPEAN CURRICULUM VITAE

Milan, 31/05/2020



PERSONAL INFORMATION

Name	RICCARDO MAJ
Date of Birth	22/07/1987
Age	32

FORMATION

- September 2006-October 2012 Degree in Medical School at the University of Pavia, Pavia, Italy, with final grade of 110/110 cum laude; thesis on: "Cardiac MRI predictors of unfavorable evolution after anterior myocardial infarction".
- August 2013-August 2018 Residency in Cardiovascular Disease at the University Hospital Foundation IRCCS Policlinico San Matteo, Pavia, Italy, under the supervision of prof. PJ Schwartz and prof. GM De Ferrari with final grade of 50/50 cum laude; thesis on "Long-term outcome following single 3-minute freeze with second-generation cryoballoon ablation for atrial fibrillation in a large cohort of patients: a single-centre experience".
- January 2018-January 2020 Electrophysiology fellow and member of the Post-graduate in Cardiac Electrophysiology and Pacing program under the supervision of prof. C De Asmundis and prof. GB Chierchia at the Heart Rhythm Management Center (HRMC) of the Universitair Ziekenhuis Brussel (UZB) Hospital, Jette, Belgium.
- September 2019-Present PhD candidate at the Vrije Universiteit Brussel (VUB) University, Brussels, Belgium.

WORKING EXPERIENCE

- August 2013-July 2016 Trained in Internal Medicine and General Cardiology at IRCCS Policlinico San Matteo. Active in Echocardiography, Holter-ECG and exercise ECG clinics and in both Cardiology and CCU wards.
- July 2016-Present Active in Electrophysiology and Pacing laboratory at Policlinico San Matteo and UZB, performing as a first operator both diagnostic (175 EP studies, 60 ILR implantations) and therapeutic procedures (150 AF ablations, 60 CTI ablations, 60 AVNRT ablations, 40 AVRT ablations, 20 PVC/VT ablations, 15 AT/atypical AFL ablations, 10 AV node ablation, 120 single or dual-chamber pacemaker implantations, 55 single or dual-chamber ICD implantations, 15 leadless pacemaker implantations, 15 CRT-P/D implantations). Experienced in all main EP mapping systems. Active in office visits for patients with arrhythmic problems or recipients of implantable cardiac devices.

PERSONAL CAPACITIES

MOTHER-TONGUE
SECOND LANGUAGE

- Reading level
- Writing level
- Speaking level

ITALIAN
ENGLISH
EXCELLENT
EXCELLENT
EXCELLENT

FURTHER INFORMATIONS

Training in Basic Life Support AHA (2010)
Training in Advance Cardiac Life Support AHA (2013)
Investigator in BLITZ-AF (2016-2017)
Participant of BioFellow Biotronik Course (2017)
Certified operator for Medtronic Micra TPS implantation (2019)

PUBLICATIONS

1. Temperature-guided ablation with the second-generation cryoballoon for paroxysmal atrial fibrillation: 3-year follow-up in a multicenter experience. J Interv Card Electrophysiol. 2020 May 31.
2. Cryoballoon ablation performed with a novel EP mapping system. Europace. 2020 May 27.
3. A novel strategy to treat vaso-vagal syncope: Cardiac neuromodulation by cryoballoon pulmonary vein isolation. Indian Pacing Electrophysiol J. 2020 Mar 26.
4. Standardized Quantification of Vagal Denervation by Extracardiac Vagal Stimulation during Second Generation Cryoballoon ablation: a Vein per Vein Analysis. J Atr Fibrillation. 2019 Oct 31;12(3):2223.
5. Pulmonary veins anatomical determinants of cooling kinetics during second-generation cryoballoon ablation. J Cardiovasc Electrophysiol. 2020 Mar;31(3):629-637.
6. Phrenic nerve palsy during right-sided pulmonary veins cryoapplications: new insights from pulmonary vein anatomy addressed by computed tomography. J Interv Card Electrophysiol. 2020 Feb 14.
7. Predictors of cardiac neuromodulation achieved by cryoballoon ablation performed in patients with atrial fibrillation who were in sinus rhythm before the ablation. Int J Cardiol. 2020 Jul 1;310:86-91.
8. Conversion of atrial fibrillation to sinus rhythm during cryoballoon ablation: A favorable and not unusual phenomenon during second-generation cryoballoon pulmonary vein isolation. J Arrhythm. 2020 Jan 16;36(2):319-327.
9. High parasympathetic activity as reflected by deceleration capacity predicts atrial fibrillation recurrence after repeated catheter ablation procedure. J Interv Card Electrophysiol. 2020 Jan 7.
10. Predictors of durable electrical isolation in the setting of second-generation cryoballoon ablation: A comparison between left superior, left inferior, right superior, and right inferior pulmonary veins. J Cardiovasc Electrophysiol. 2020 Jan;31(1):128-136.
11. Mid-term outcome following second-generation cryoballoon ablation for atrial fibrillation in heart failure patients: effectiveness of single 3-min freeze cryoablation performed in a cohort of patients with reduced left ventricular systolic function. J Cardiovasc Med. 2019 Oct;20(10):667-675. .
12. Posterior box isolation as an adjunctive ablation strategy during repeat ablation with the second-generation cryoballoon for recurrence of persistent atrial fibrillation: 1-year follow-up. J Interv Card Electrophysiol. 2019 Oct;56(1):1-7.
13. Evaluation of the luminal esophageal temperature behavior during left atrium posterior wall ablation by means of second generation cryoballoon. J Interv Card Electrophysiol. 2019 Aug;55(2):191-196.
14. Hybrid thoracoscopic epicardial ablation of right ventricular outflow tract in patients with Brugada syndrome. Heart Rhythm. 2019 Jun;16(6):879-887.
15. Radiofrequency versus cryoballoon ablation for atrial fibrillation in the setting of left common pulmonary veins. Pacing Clin Electrophysiol. 2019 Nov;42(11):1456-1462.
16. Anatomic predictors of late right inferior pulmonary vein reconnection in the setting of second-generation cryoballoon ablation. J Cardiovasc Electrophysiol. 2019 Nov;30(11):2294-2301.
17. Two-year follow-up of one-stage left unilateral thoracoscopic epicardial and transcatheter endocardial ablation for persistent and long-standing persistent atrial fibrillation. J Interv Card Electrophysiol. 2019 Sep 13.